

Born in Cleveland YES NO

THE CLEVELAND MUSEUM OF ART

FORTY-FIFTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
MAY 8 to JUNE 16, 1963

LETTER
PLAINLY
OR TYPE

Collaborator if any

Artist

ELIZABETH C. MCFADYEN

LAST NAME

Address 14521 SHAW AVE. E.CLEVELAND 12. County CUYAHOGA Tel. GL 1-4325
No. Street City Zone County

N

STREET

CITY

ZONE

COUNT'

Tel. GL 1

Tel. GL 1-4323

Out-of-town residents should state whether return shipment is required. YES NO

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank..

NUMBER FOR
SALE NUMBER IN
EDITION
(Graphic Pts.) PRICE TITLE MEDIUM CLASS DO NOT WRITE IN
THESE COLUMNS

	35°	TEAPOT No I	Stoneware	7	1299 ✓	R	
	35°	TEAPOT No II	Stoneware	7	1300 ✓	R	
	35°	<u>COVERED JAR</u>	"	7	1301 ✓	R	
	25°	Pot No I	<u>covered</u>	..	7	1302 ✓	R
	35°	Pot No II	<u>covered</u>	..	7	1303 ✓	R
	30°	Pot No III		..	7	1304 ✓	R

SUBMIT ENTRY BLANK NO LATER THAN MARCH 11, 1963.

Use second blank if required

IMPORTANT

This entry blank must be fully made out, (typewritten or plainly printed) and signed.
Unsigned entry blanks will not be accepted.

REC'D MAR 11 1963

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1963.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

Elizabeth McFadyen
SIGNATURE

SIGNATURE